



Central Depository Services (India) Limited

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COMMUNIQUÉ TO DEPOSITORY PARTICIPANTS

CDSL/OPS/DP/POLCY/2025/27

January 10, 2025

IMMEDIATE CYBER INCIDENT & QUARTERLY CYBER INCIDENT REPORTING BY DPs

DPs are advised to refer to SEBI circular No: SEBI/HO/MIRSD/TPD/P/CIR/2022/93 dated June 30, 2022, wherein all Cyber-attacks, threats, cyber-incidents and breaches experienced by Stock brokers / Depositories Participants shall be reported to **Stock Exchanges / Depositories & SEBI within 6 hours of noticing / detecting** such incidents.

In view of the above, Depository Participants are hereby informed that CDSL has developed a facility for online submission of cyber incident reporting through audit web portal. Depository Participants shall also report about such incidents to CDSL through the dedicated e-mail id: dpincident@cDSLindia.com.

For submitting the **immediate cyber incident report** to Stock Exchanges / Depositories, please refer **Annexure A**.

Further the incident shall also be reported to Indian Computer Emergency Response team (CERT-In) in accordance with the guidelines / directions issued by CERT-In from time to time. Additionally, the Stockbrokers / Depository Participants, whose systems have been identified as "Protected system" by National Critical Information Infrastructure Protection Centre (NCIIPC) shall also report the incident to NCIIPC.

In addition to this, Stock Brokers / Depository Participants **must submit mandatory quarterly reports** to Stock Exchanges / Depositories on cyber-attacks, threats, incidents, breaches, and mitigation measures, including useful information on vulnerabilities, **within 15 days after the end of each quarter** i.e. Apr-June (**Q1**), Jul-Sep (**Q2**), Oct-Dec (**Q3**), Jan-Mar (**Q4**).

For submitting the **quarterly cyber incident report** to Stock Exchanges / Depositories, please refer **Annexure B**.



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Queries regarding this communiqué may be addressed to: CDSL – Helpdesk Emails may be sent to: dptasupport@cDSLindia.com and connect through our IVR Number 022-62343333.

For and on behalf of

Central Depository Services (India) Limited

sd/-

Akhil Wadhavkar

Vice President– Information Technology



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Annexure A

Guidelines to submit Immediate Cyber Incident Report

1. Open the Audit Web Portal.
 - Link: <https://auditweb.cdslindia.com/Login.aspx>
 - Click on Login Type and select “**Designated Officer**” login.



AUDIT APPLICATION

SIGN IN

Login Type: Designated Officer

User ID: --Select--
Auditor
DP
RTA
CDSL_Staff
Designated Officer
CISA_Auditor
Auction Committee
Bidding Participant
IS_Auditor
DP_Admin
RTA_Admin
General_Admin

Password: [Empty]

[Forgot password](#) [Registration for DP / RTA](#)

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2. Fill the below required information and click on “**Sign In**” Button:
 - User ID , Password & Captcha



AUDIT APPLICATION

SIGN IN

Login Type: Designated Officer

User ID: 741910_ks

Password: [Masked]

Captcha: 7afff1

Sign In

[Forgot password](#) [Registration for DP / RTA](#)

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3. Enter the OTP:

- You will receive the OTP on both your DP's registered mobile number and email Id.



AUDIT APPLICATION

LOGIN OTP

Enter OTP

OTP Time :- 00:09:57 Don't refresh the page

Verify OTP

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4. Select required information for submitting **immediate "Cyber Incident"** report:

- Select Audit Type: **CYBER MULTIPLE INCIDENT REPORT**
- Select Audit Month: **Select the current month**
- Select DP/RTA: **Select your DP ID**
- Click on the **"Confirm"** Button



AUDIT APPLICATION

Reports

Select Audit Type: CYBER MULTIPLE INCIDENT REPORT

Select Audit Month: July-2024

Select DP / RTA: 741

Confirm

[View Cyber Report](#) [VAPT Compliance](#) [VAPT Resubmission](#)
[Cyber Audit Compliance Report](#) [Cyber RCA Report](#)
[System Audit Compliance Report](#)

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5. The following screen will appear. Main DP can mention the branch DP IDs, if they are submitting consolidated report for branch DP IDs.

CYBER INCIDENT REPORT

Audit Type	CYBER INCIDENT REPORT	DP Name (ID)	74 LIP
Audit Month	202403	Period	Jan-2024 to Mar-2024
DP ID	74		

Cyber Incident Report covers the following Branch DPIDs :-

6. Fill in the details in the prescribed format in:

1. **Letter/Report Subject**
2. **Reporting Periodicity Year**
3. **Designated Officers details.**

Incident Reporting Form

1. **Letter/Report Subject**

NAME OF THE DEPOSITORY PARTICIPANT	7410	UNIQUE INCIDENT No. :- 1
NAME OF DEPOSITORY	CDSL	Financial Year = 2024-2025
MEMBER ID / DP ID	741	

2. **Reporting Periodicity Year**

QUARTER 4 [JAN-2024 TO MAR-2024]

3. **Designated Officer (Reporting Officer details)**

* NAME	Name	* ORGANIZATION	Organization name
TITLE	Title	* EMAIL ID	Email ID
PHONE / FAX No.	Phone / Fax No	* MOBILE	Mobile
ADDRESS	Address		

7. Select the option **Yes** in Cyber-attack/breach observed in Quarter and fill the below required information:

- Date & Time
- Brief information on the Cyber attack
- Then Click on Annexure I



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Cyber-attack / breach observed in Quarter

Yes No (IF YES, PLEASE FILL ANNEXURE I) (IF NO, PLEASE SUBMIT THE NIL REPORT ONLY AFTER THE END OF QUARTER)

* DATE & TIME: 10-Jul-2024 04 15 PM (Select the Date between 01-Jan-2024 To 31-Mar-2024)

* BRIEF INFORMATION ON THE CYBER ATTACK / BREACH OBSERVED: Brief information on the Cyber-attack

[ANNEXURE I](#)

8. Fill the relevant details in **Annexure I**:

1. Physical location of affected computer/ Network and name of ISP
2. Date incident occurred
3. Information of affected system
4. Select the type/types of incidents
5. Description of incident

Annexure I

1. Physical location of affected computer / Network and name of ISP

Physical location of affected computer / Network and name of ISP

2. Date incident occurred

OCCURRED: dd-MMM-yyyy Hour Minutes PM (Select the Date between 01-Jan-2024 To 31-Mar-2024)

IDENTIFIED: dd-MMM-yyyy Hour Minutes PM

3. Information of affected system

IP ADDRESS: IP Address COMPUTER / HOST NAME: Computer / Host Name

LAST PATCHED / UPDATED: dd-MMM-yyyy OPERATING SYSTEM (INCL. VER / RELEASE NO.): Operating System

HARDWARE VENDOR / MODEL: Hardware model

4. Type of incident

PHISHING WEBSITE DEFACTION BOT/BOTNET DISTRIBUTED DENIAL OF SERVICE(DDoS) SOCIAL ENGINEERING RANSOMWARE

NETWORK SCANNING / PROBING BREAK-IN/ROOT SYSTEM MISUSE EMAIL SPOOFING USER ACCOUNT COMPROMISE TECHNICAL VULNERABILITY OTHER

VIRUS/MALICIOUS CODE SPAM DENIAL OF SERVICE(DoS) WEBSITE INTRUSION IP SPOOFING

5. Description of Incident

Description of incident

9. Fill the below Information:

- Select Unusual behaviour/symptoms (Tick the symptoms)
- Fill the Details of unusual behaviour/symptoms
- Has this problem been experienced earlier? If Yes, Give the description



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6. Unusual behavior/symptoms (Tick the symptoms)

<input type="checkbox"/> SYSTEM CRASHES	<input type="checkbox"/> CHANGES IN FILE LENGTHS OR DATES
<input type="checkbox"/> NEW USER ACCOUNTS/ ACCOUNTING DISCREPANCIES	<input type="checkbox"/> ATTEMPTS TO WRITE TO SYSTEM
<input type="checkbox"/> FAILED OR SUCCESSFUL SOCIAL ENGINEERING ATTEMPTS	<input type="checkbox"/> DATA MODIFICATION OR DELETION
<input type="checkbox"/> UNEXPLAINED, POOR SYSTEM PERFORMANCE	<input type="checkbox"/> DENIAL OF SERVICE
<input type="checkbox"/> UNACCOUNTED FOR CHANGES IN THE DNS TABLES, ROUTER RULES, OR FIREWALL RULES	<input type="checkbox"/> DOOR KNOB RATTLING
<input type="checkbox"/> UNEXPLAINED ELEVATION OR USE OF PRIVILEGES OPERATION OF A PROGRAM OR SNIFFER DEVICE TO CAPTURE NETWORK TRAFFIC	<input type="checkbox"/> UNUSUAL TIME OF USAGE
<input type="checkbox"/> AN INDICATED LAST TIME OF USAGE OF A USER ACCOUNT THAT DOES NOT CORRESPOND TO THE ACTUAL LAST TIME OF USAGE FOR THAT USER	<input type="checkbox"/> UNUSUAL USAGE PATTERNS
<input type="checkbox"/> A SYSTEM ALARM OR SIMILAR INDICATION FROM AN INTRUSION DETECTION TOOL	<input type="checkbox"/> UNUSUAL LOG FILE ENTRIES
<input type="checkbox"/> ALTERED HOME PAGES, WHICH ARE USUALLY THE INTENTIONAL TARGET FOR VISIBILITY, OR OTHER PAGES ON THE WEB SERVER	<input type="checkbox"/> PRESENCE OF NEW SETUID OR SETGID FILES CHANGES IN SYSTEM DIRECTORIES AND FILES
<input type="checkbox"/> ANOMALIES	<input type="checkbox"/> PRESENCE OF CRACKING UTILITIES
<input type="checkbox"/> SUSPICIOUS PROBES	<input type="checkbox"/> ACTIVITY DURING NON-WORKING HOURS OR HOLIDAYS
<input type="checkbox"/> SUSPICIOUS BROWSING NEW FILES	<input type="checkbox"/> OTHER

7. Details of unusual behavior/symptoms

Details of unusual behavior

8. Has this problem been experienced earlier? If Yes, details Yes No

10. Fill the below Information:

- Agencies notified
- IP Address of apparent or suspected source
- How many host(s) are affected?

9. Agencies notified

LAW ENFORCEMENT	<input type="text" value="Law Enforcement"/>	PRIVATE AGENCY	<input type="text" value="Private Agency"/>
AFFECTED PRODUCT VENDOR	<input type="text"/>	OTHER	<input type="text"/>

10. IP Address of apparent or suspected source

SOURCE IP ADDRESS	<input type="text"/>	OTHER INFORMATION AVAILABLE	<input type="text"/>
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11. How many host(s) are affected?

1 to 10 10 to 100 MORE THAN 100

12. Details of actions taken for mitigation and any preventive measure applied

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DPs can also save the multiple incidents in quarterly incident report module in audit web portal. After reporting each incident, please enter the "Save" button & add another incident if any. After entering all the incidents, please enter the **Submit to CDSL**.

Attach Files: Click "**Attach Files**" to upload relevant documents.

Save: Click "Save" to save your information as a draft.

Submit to CDSL: Click "**Submit to CDSL**" to officially submit your report.

Clear: Click "**Clear**" to remove all entered data and reset the form.



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Annexure B

Guidelines to submit Quarterly Cyber Incident Report

1. Open the Audit Web Portal.

- Link: <https://auditweb.cdslindia.com/Login.aspx>
- Click on Login Type and select “**Designated Officer**” login.



AUDIT APPLICATION

SIGN IN

Login Type: Designated Officer

User ID: --Select--

Password: [Redacted]

Forgot password Registration for DP / RTA

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2. Fill the below required information and click on “**Sign In**” Button:

- User ID, Password & Captcha



AUDIT APPLICATION

SIGN IN

Login Type: Designated Officer

User ID: 741910_ks

Password: [Masked]

Captcha: 7afff1

Sign In

Forgot password Registration for DP / RTA

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3. Enter the OTP:

- You will receive the OTP on both your DP's registered mobile number and email Id.



AUDIT APPLICATION

LOGIN OTP

Enter OTP

OTP Time :- 00:09:57 Do not refresh the page

Verify OTP

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4. Select required information for submitting quarterly “Cyber Incident” report:

- Select Audit Type: **CYBER INCIDENT REPORT**
- Select Audit Month: **Select quarter month**
- Select DP/RTA: **Select your DP ID**
- Click on the “Confirm” Button



AUDIT APPLICATION

Reports

Select Audit Type: CYBER INCIDENT REPORT

Select Audit Month: September-2022

Select DP / RTA: 74

Confirm

[View Cyber Report](#) [VAPT Compliance](#) [VAPT Resubmission](#)
[Cyber Audit Compliance Report](#) [Cyber RCA Report](#)
[System Audit Compliance Report](#)
[Go to Login](#) | [Change Password](#)

FAQ

[FAQ for online submission of IAR](#) [Manual for Online Submission of HCC](#)

[User Manual](#)



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5. The following screen will appear. Main DP can mention the branch DP IDs , if they are submitting consolidated report for branch DP IDs.

The screenshot shows the 'AUDIT APPLICATION' form for a 'CYBER INCIDENT REPORT'. The form includes the following fields:

Audit Type	CYBER INCIDENT REPORT	DP Name(ID)	74 [Redacted]
Audit Month	202403	Period	Jan-2024 to Mar-2024
DP ID	74 [Redacted]		

Cyber Incident Report covers the following Branch DPIDs :-

[Redacted]

6. Fill in the details in the prescribed format in:

1. Letter/Report Subject
2. Reporting Periodicity Year
3. Designated Officers details.

The screenshot shows the 'Incident Reporting Form' with the following sections:

1. Letter/Report Subject

NAME OF THE DEPOSITORY PARTICIPANT	7410 [Redacted]	UNIQUE INCIDENT No. :- 1
NAME OF DEPOSITORY	CDSL	Financial Year - 2024-2025
MEMBER ID / DP ID	741 [Redacted]	

2. Reporting Periodicity Year

QUARTER 4 [JAN-2024 TO MAR-2024]

3. Designated Officer (Reporting Officer details)

* NAME	Name	* ORGANIZATION	Organization name
TITLE	Title	* EMAIL ID	Email ID
PHONE / FAX NO.	Phone / Fax No	* MOBILE	Mobile
ADDRESS	Address		

7. Select the option **NO** in Cyber-attack/breach observed in Quarter: **(If no incident has occurred)**



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Cyber-attack / breach observed in Quarter

Yes No (If YES, PLEASE FILL ANNEXURE I) (If NO, PLEASE SUBMIT THE NIL REPORT ONLY AFTER THE END OF QUARTER)

DATE & TIME
(Select the Date between 01-Jul-2023 To 30-Sep-2023)

BRIEF INFORMATION ON THE CYBER ATTACK / BREACH OBSERVED

[ANNEXURE I](#)

[Save](#) [Submit to CDSL](#) [Clear](#) [Attach Files](#) [View Incident](#)

The Report is submitted as NIL report.

8. Select the option **Yes** in Cyber-attack/breach observed in Quarter and fill the below required information: **(if the incident occurred)**

- Date & Time
- Brief information on the Cyber attack
- Then Click on Annexure I

Cyber-attack / breach observed in Quarter

Yes No (If YES, PLEASE FILL ANNEXURE I) (If NO, PLEASE SUBMIT THE NIL REPORT ONLY AFTER THE END OF QUARTER)

* DATE & TIME
(Select the Date between 01-Jan-2024 To 31-Mar-2024)

* BRIEF INFORMATION ON THE CYBER ATTACK / BREACH OBSERVED

[ANNEXURE I](#)

9. Fill the **Annexure I**:

6. Physical location of affected computer/ Network and name of ISP
7. Date incident occurred
8. Information of affected system
9. Select the type/types of incidents
10. Description of incident



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Annexure I

1. Physical location of affected computer / Network and name of ISP

Physical location of affected computer / Network and name of ISP

2. Date incident occurred

OCURRED (Select the Date between 01-Jan-2024 To 31-Mar-2024)

IDENTIFIED

3. Information of affected system

IP ADDRESS COMPUTER / HOST NAME

LAST PATCHED / UPDATED OPERATING SYSTEM (INCL. VER / RELEASE NO.)

HARDWARE VENDOR / MODEL

4. Type of incident

PHISHING WEBSITE DEFACTION BOT/BOTNET DISTRIBUTED DENIAL OF SERVICE(DDoS) SOCIAL ENGINEERING RANSOMWARE

NETWORK SCANNING / PROBING BREAK-IN/ROOT SYSTEM MISUSE EMAIL SPOOFING USER ACCOUNT COMPROMISE TECHNICAL VULNERABILITY OTHER

VIRUS/MALICIOUS CODE SPAM DENIAL OF SERVICE(DoS) WEBSITE INTRUSION IP SPOOFING

5. Description of Incident

Description of incident

10. Fill the below Information:

- Select Unusual behaviour/symptoms (Tick the symptoms)
- Fill the Details of unusual behaviour/symptoms
- Has this problem been experienced earlier? If Yes, Give the description

6. Unusual behavior/symptoms (Tick the symptoms)

<input type="checkbox"/> SYSTEM CRASHES	<input type="checkbox"/> CHANGES IN FILE LENGTHS OR DATES
<input type="checkbox"/> NEW USER ACCOUNTS/ ACCOUNTING DISCREPANCIES	<input type="checkbox"/> ATTEMPTS TO WRITE TO SYSTEM
<input type="checkbox"/> FAILED OR SUCCESSFUL SOCIAL ENGINEERING ATTEMPTS	<input type="checkbox"/> DATA MODIFICATION OR DELETION
<input type="checkbox"/> UNEXPLAINED, POOR SYSTEM PERFORMANCE	<input type="checkbox"/> DENIAL OF SERVICE
<input type="checkbox"/> UNACCOUNTED FOR CHANGES IN THE DNS TABLES, ROUTER RULES, OR FIREWALL RULES	<input type="checkbox"/> DOOR KNOB RATTLING
<input type="checkbox"/> UNEXPLAINED ELEVATION OR USE OF PRIVILEGES OPERATION OF A PROGRAM OR SNIFFER DEVICE TO CAPTURE NETWORK TRAFFIC	<input type="checkbox"/> UNUSUAL TIME OF USAGE
<input type="checkbox"/> AN INDICATED LAST TIME OF USAGE OF A USER ACCOUNT THAT DOES NOT CORRESPOND TO THE ACTUAL LAST TIME OF USAGE FOR THAT USER	<input type="checkbox"/> UNUSUAL USAGE PATTERNS
<input type="checkbox"/> A SYSTEM ALARM OR SIMILAR INDICATION FROM AN INTRUSION DETECTION TOOL	<input type="checkbox"/> UNUSUAL LOG FILE ENTRIES
<input type="checkbox"/> ALTERED HOME PAGES, WHICH ARE USUALLY THE INTENTIONAL TARGET FOR VISIBILITY, OR OTHER PAGES ON THE WEB SERVER	<input type="checkbox"/> PRESENCE OF NEW SETUID OR SETGID FILES CHANGES IN SYSTEM DIRECTORIES AND FILES
<input type="checkbox"/> ANOMALIES	<input type="checkbox"/> PRESENCE OF CRACKING UTILITIES
<input type="checkbox"/> SUSPICIOUS PROBES	<input type="checkbox"/> ACTIVITY DURING NON-WORKING HOURS OR HOLIDAYS
<input type="checkbox"/> SUSPICIOUS BROWSING NEW FILES	<input type="checkbox"/> OTHER

Details of unusual behavior/symptoms

Details of unusual behavior

8. Has this problem been experienced earlier? If Yes, details Yes No

11. Fill the below Information:

- Agencies notified
- IP Address of apparent or suspected source
- How many host(s) are affected?



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9. Agencies notified

LAW ENFORCEMENT	<input type="text" value="Law Enforcement"/>	PRIVATE AGENCY	<input type="text" value="Private Agency"/>
AFFECTED PRODUCT VENDOR	<input type="text"/>	OTHER	<input type="text"/>

10. IP Address of apparent or suspected source

SOURCE IP ADDRESS	<input type="text"/>	OTHER INFORMATION AVAILABLE	<input type="text"/>
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11. How many host(s) are affected?

1 TO 10 10 TO 100 MORE THAN 100

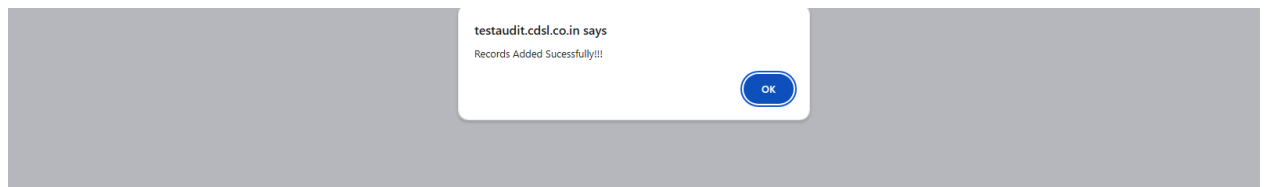
12. Details of actions taken for mitigation and any preventive measure applied

[Save](#) [Submit to CDSL](#) [Attach Files](#) [View Incident](#)

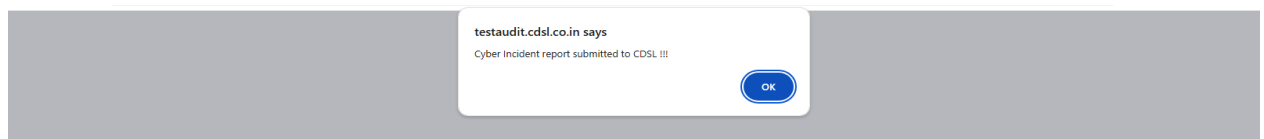
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Attach Files: Click "Attach Files" to upload relevant documents.

Save: Click "Save" to save your information as a draft.



Submit to CDSL: Click "Submit to CDSL" to officially submit your report.



View Incident: Click "View Incident" to see your submitted reports history.

ANNEXURE I

[Save](#) [Submit to CDSL](#) [Attach Files](#) [View Incident](#)

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Note:

- All incidents report activities must be completed in one continuous action, from saving to submitting the incident report.
- Once you submit the incident report, it cannot be submitted again.
- When you re-login, the scheduled month/DP ID will not appear, that means you have already submitted the incident report.
